SOLICITATION, OFFER AND AWARD									TRACT IS A RATED ORDI AS (15 CFR 350)		ER RATING		PAGE OF PAGES 1 63		
CONTRACT (Proc. Inst. Ident.) NO. 3. SOLICITATION N					NO.			LICITATIO			SUED 6. REC		QUISITION/PURCHASE NO.		
STT100				TT100150	00042			LED BID		9/4/2015		PR4671012			
7. ISSUED BY STT10015Q0042						[X]	NEGC	OTIATEI	DRESS OFFER TO (If other than item						
COL		•						0. 711	DICESS OF	TER TO (II out	ier than item 7)				
		Embassy Dili													
					ili, Timor-Les										
Phone: 3324684 Fax: 3313206 NOTE: In sealed bid solicitation "offer" and "offeror" mean "bid" and "bidder".															
110	E. III SC	area ora somera	tion one:	una oneroi	mean ora and	ΓΙΟΝ									
					ing the supplies	or services i	n the	Schedule	will be re	ceived at the p	place specifice	d, in the de	epository loca	ited in	
unti	l Sept	<u>ember 25, 2</u>	015 local	time 12:0	<u>0Hrs.</u>	(1	`				(date)				
	(hour) (date) CAUTION - LATE Submissions, Modifications, and Withdrawals: See Section L. Provision No. 52.215-1. All offers are subject to all tems and conditions contained in this solicitation.														
		FORMATION	A. NAM	E			В	B. TELE	PHONE (NO COLLEC	T	C. E-N	MAIL ADDR	ESS	
CALL: Retchel M. Soares								CALLS)				D'''			
Dili	Procurer	nent					A	AREA CO		DE NUMBER EXT DE 332-4684 2074			oiliproc@state.gov		
					1	1. TABLE	E OF CONTENTS								
(x) SEC. DESCRIPTION PAG								(x) SEC. DESCRIPTION							
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13. DISCOUNT FOR PROMPT PAYMENT SEE 14 10 CALENDAR (See section I, Clause No 52.232-8) DAYS								0 CALE	NDAR DA	DAYS 30 CALENDAR DAYS			CALENDAR DAYS %		
(See section I, Clause No 32.232-0)												%			
14. ACKNOWLEDGMENT OF AMENDMENTS AMENDME							,	D	ATE	AN	MENDMENT	NO.	NO. DATE		
(The offeror acknowledges receipt of amendments to the solicitation and related documents)															
	e solicita bered an		documents)											
IIdii	ocica an	d dated.													
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AND ADDRESS										TO SIGN C	OFFER (Type	or print)			
OF OF															
OFF	EROR														
15B. TELEPHONE NO. (Include area 15C. CHECK IF REMITTANCE 17. SIGNATURE 18. OFFER DATE														D	
code		HONE NO. (II	iciude area	ADDRE		DIFFEREN'		OM	17. SIGNATURE			18. OFFER DATE			
ABOVE - ENTER SUCH ADDRESS															
AWARD (To be completed by Government) 19. ACCEPTED AS TO ITEM NUMBERED 20. AMOUNT 21. ACCOUNTING AND APPROPRIATION															
19.	ACCEP	TED AS TO ITE	EM NUMBE	ERED 20	. AMOUNT		21. A	CCOUN	TING AN	D APPROPR	IATION				
22.	AUTHO	RITY FOR USI	NG OTHER	THAN FUI	LL AND OPEN (COMPETIT	ION:	23 \$	SUBMIT II	NVOICES TO) ADDRESS S	SHOWN I	N ITEM		
		S.C. 2304(c)()		.S.C. 253(c)()	-0.1.	((4 copies unless otherwise specified)						
		TRATION BY (If	other than Iter	n 7)				25. P	25. PAYMENT WILL BE MADE BY CODE						
CODE															
26. NAME OF CONTRACTING OFFICER (Type or print)								27. U	27. UNITED STATES OF AMERICA 28.				28. AWAF	RD DATE	
									ature of C	Contracting O	fficer)				
IMP	ORTAN	T - Award will b	e made on t	his form, or	on the Standard										